POR INSTRUCTIONS, SEE BACK OF FORM

File with:

Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees IA ETHICS AND for state office must be filed electronically and effective January 1, 2012, all MPAIGN GUEST AND statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State 2010 JAN 15 PM 12: 42

Parties must be filed electronically.

Reset Form

AND	NESEL FL	MILL 3		
COMMITTEE NAME (Must be same as on Statement of Organ	nization)			
Citizens for Rouse			FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: [(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Botton Local Ballot Issue)State PAC (3)State Party	al C (E	DR-2 Rev. 12/2009) or Office Use Orl	-
CANDIDATE COMMITTEES ONLY:				
Candidate Name	Political Party (if applicable)	S	canned	
Linda Rouse	Democratic	C	omputer	
Office Sought Board of Supervisors	District (if Senate or House)			
Late reports are subject to possible civil and criminal penalties. Pursicandidate's committee, and the chairperson, for any other type of control of the chair person, for any other type of control of the chair person.	uant to lowa Code sections 68B.32/ mmittee, is the individual responsibl	A(7) and 68/ e for filing ti	A.401(3), the can mely and accura	didate, for a te reports.
Linda Rause	(11 112 7120			
SIGNATURE OF PERSON FILING REPORT	641-437-7129 TELEPHONE		/- /3- /C DATE SI) SNED
IAM FILINGA January 19, 2010	REPORT FOR (1) ELECTION	/(2)NON-E	ELECTION YEA	R.
(report date)	Indicate by	#2		
☐CHECK IF AMENDMENT TO REPORT DATED		Local Comr	nittees, enter Date	of Flection
Check if this is final (termination) report and attach Notice of I (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	County & Lo which Elect	ocal Committees, ion is held	enter County in
STATEMENT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the cas of the last reporting period or must be zero if this is first	sh on hand at the end	s	5.8	ੁ [•] ਤ
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)	. *	0	
Schedule F: Loans Received total (Attach Schedule F)				
Schedule H: Total Sales of Campaign Property (Attach	Schedule H)	••••	0	
(Schedule H applies to Candidates' Commit	tees Only)			
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TOTAL	\$	5,8	3
Schedule B: Expenditures total (Attach Schedule B) (**	also see debts and loans below)		5.83	:
Schedule F: Loan Repayments total (Attach Schedule I	•		0	<u> </u>
CASH ON HAND at the end of this reporting period (if final report			0	
**UNPAID BILLS (From Schedule D - Attach Schedule D)			Ō	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule				0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F			7,800	
CONSULTANT BREAKDOWN (Schedule G Attached?)	· ·····		YESN	0
CANDIDATE COMMITTEES ONLY:				~
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach	Schedule H)	\$	0	
STATE COMMITTEES: Submit a reconciled campaign account b		•		

R			

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES				
CHECK THIS BOX IF					

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COMMITTEE NAME (Must be same as	on Staten	sent of Omenization)	
The contract of the contract o	on olulon	ient of Organization)	
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Citizens	tor	Kausal	

		1,000		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2/23/09	ID# CK#	Linda Rouse 1104 W. Ontario St Centerville, IA 5544	close bank acet. closing withdrawal	\$ 5.78
1/13/10	ID# CK#		correct error of addition on Schedule Bf!led 1-14-09	.05
	ID# CK#			
	ID# CK#			
	ID# CK#		·	
	ID# CK#			
	ID# CK#	·		
	ID# CK#			
<u></u> -L			SUB-TOTAL	\$ 5.60

TOTAL (if last page of this schedule) \$ 5,8

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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Page	- 1	l of	

COMMITTEE NAME (Must be same as on Statement of Organization)		SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
	Reset Form		KTHIS BOX IF DING FORM

DATE					
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
7/8/09	Unda Rouse 1104 W. Oritario St. Center Ville IA 52544	Self	loan	1,000.	
9/25/09	Linda Rouse (Same)	Self	loan	500.	
10/22/09	Linda Rouse (Same)	self	loan	300,	
					` 🔲
			SUB-TOTAL	\$ 1800.	
			TOTAL (if last page of this schedule)	1800.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page (for Schedule E)